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## APPLICANTS

Lynette Ross, Mountain View, CA;

Dirk Fengels, Santa Cruz, CA;

Edwin M. Pearce JR., Golden, CO; James R. Mault, Evergreen, CO;

Christopher L. Sandys, Stanwood, WA;

Tom Kilbourn, Saratoga, CA;

## \*\* CONTINUING DATA \*\*\*\*\*

This appln claims benefit of 60/400,265 08/01/2002

and claims benefit of 60/412,155 09/19/2002

~~and claims benefit of 60/420,262 11/25/2002 \*~~

(\*)Data provided by applicant is not consistent with PTO records.

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 10/27/2003

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	CA	25	28	5

## ADDRESS

COOLEY GODWARD LLP

Five Palo Alto Square

3000 El Camino Real

Palo Alto, CA

94306-2155

## TITLE

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